

862.C1893



PATENT APPLICATION

DA 12/20/01
#EB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
HIROSHI SATOMI ET AL.) Examiner: Not Yet Assigned
Application No.: 09/547,398) Group Art Unit: 2722
Filed: April 11, 2000)
For: PORTABLE TERMINAL)
APPARATUS AND)
TERMINAL APPARATUS) September 26, 2001

Commissioner for Patents
Washington, D.C. 20231

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Technology Center 2600

SUPPLEMENTAL PRELIMINARY AMENDMENT

Sir:

Prior to examination on the merits, please amend the above-identified application
as follows:

IN THE CLAIMS:

Please cancel Claims 15 and 16, without prejudice or disclaimer of the subject
matter presented therein.

Please amend Claims 6, 7, 14, and 21-24 and add new Claims 25-28 as follows.

A marked-up version of the amended claims, showing the changes made thereto, is attached.

6. (Amended) A portable terminal apparatus for communicating with an external
device, comprising:

09/28/2001 SSESHE1 00000004 09547398
01 FC:103
02 FC:102
18.00 DP
560.00 DP



In re Application of:

HIROSHI SATOMI ET AL.

Application No.: 09/547,398

Filed: April 11, 2000

For: PORTABLE TERMINAL APPARATUS AND
TERMINAL APPARATUS

Docket No. 862.C1893

Examiner: Not Yet Assigned

Group Art Unit: 2722

Date: September 26, 2001

COMMISSIONER FOR PATENTS
Washington, D.C. 20231

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 21	MINUS	** 20	= 1	x \$9 \$18	\$18.00
INDEP. CLAIMS	* 10	MINUS	*** 3	= 7	x \$40 \$80	\$560.00
Fee for Multiple Dependent claims \$135°/\$270						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$578.00

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☒ A check in the amount of \$578.00 is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

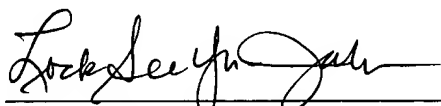
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$____ to cover the fee for a ____-month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants
LOCK SEE YU-JAHNES
Registration No. 38,667

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